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APPLICANTS Travis S. Carter, Kennewick, WA; <i>one PD</i>				
** CONTINUING DATA ***** <i>No PD</i>				
** FOREIGN APPLICATIONS ***** <i>No PD</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 01/22/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i>		STATE OR COUNTRY WA	SHEETS DRAWING 4	TOTAL CLAIMS 54
Verified and Acknowledged <i>Signature</i> Examiner's Signature <i>PD</i> Initials			INDEPENDENT CLAIMS 6	
ADDRESS 500				
TITLE Surgical irrigation system				
FILING FEE RECEIVED 820	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	